

## MANAGED RISK MEDICAL INSURANCE BOARD REQUEST FOR WEBSITE ACCESS

This form is to be used to gain access to the plan specific Healthy Family Program capitation files available monthly on the MRMIB website. Every time a new employee needs access to that website a new request *must be* filed with the Managed Risk Medical Insurance Board Information Technology Unit. Based upon the information provided by you, a web address (URL), a user name and a password will be provided. All information obtained on this website is to remain **confidential**. Signing this document acknowledges this requirement.

Plan Name*
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Plan Contact Mailing Address*
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Supervisor Name*
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Signature*
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Supervisor E-Mail*
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Phone Number*
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New Employee Name*
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Signature*
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New Employee E-Mail*
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Phone Number*
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For MRMIB Use Only

User Name
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Password
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Web Address
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MRMIB Authorized Signature
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Date Prepared
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Date Plan Notified
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\* Required Information

Any further information can be obtained by contacting Gurmeet Hajrah, Associate Information Systems Analyst at (916) 324-4896 or at [ghajrah@mrmib.ca.gov](mailto:ghajrah@mrmib.ca.gov).

Mail the original signed form to Stuart Busby, Financial Operations Officer at 1000 "G" Street, Suite 450, Sacramento, CA 95814. Additionally, send him either a faxed copy to (916) 327-6580 or email (word document or PDF format) a copy to [sbusby@mrmib.ca.gov](mailto:sbusby@mrmib.ca.gov).